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For Other Than An Authorized Committee COffice/Use Offy ATE TYPE OR PRINT ▼ Example: If typing, type NAME OF 12FE4M5 COMMITTEE (in full) over the lines. SIDIN ADDRESS (number and street) Check if different than previously 10024 reported. (ACC) ZIP CODE A 2. FEC IDENTIFICATION NUMBER ▼ CITY A STATE A 000490292 3. IS THIS NEW **AMENDED** OR REPORT (N)(A) 4. TYPE OF REPORT Nov 20 (M11) (Non-Election Year Only) (b) Monthly Feb 20 (M2) May 20 (M5) Aug 20 (M8) Report (Choose One) Due On: Dec 20 (M12) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (Non-Election Year Only) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 i . Quarterly Report (Q1) (c) Runoff (12R) 12-Day Primary (12P) General (12G) July 15 PRE-Election Quarterly Report (Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year (d) 30-Day Report (Non-election **POST-Election** General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: Termination Report in the (TER) Election on State of 16 01 . 2014 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Mallos Type or Print Name of Treasurer bivox 12 30 Loit Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. Office